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B O A R D O F
N U R S I N G



Idaho Board of Nursing

STRATEGIC PLAN

FY 2007

For the period July 1, 2006 to June 30, 2010

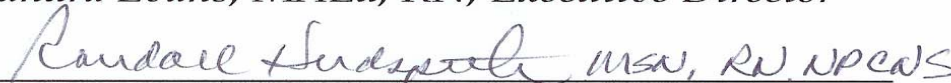
Submitted:

July 1, 2006

Signed:


Sandra Evans, MAEd, RN, Executive Director

Approved:


Randall Hudspeth, NP, CNS, RN, Chairman

MISSION STATEMENT

The Mission of the Idaho Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety and welfare.

VISION

Idaho Board of Nursing... The Model for Excellence

- ◆ ***Excellence in Nurse Licensing***
- ◆ ***Excellence in Nursing Practice***
- ◆ ***Excellence in Nursing Education***

The Board envisions continual pursuit of excellence: excellence in nurse licensing, nursing practice, and nursing education. To this end, excellence is validated by recognition for best practice, meeting or exceeding national standards, and application of benchmark strategies. Excellence is determined within the context of space and time, and may be influenced by inputs such as new knowledge, evolving science and technology, and dynamic partnerships. The Board is and will always be vigilant in maintaining or strengthening public safeguards while eliminating or preventing unnecessary barriers for Idaho's workforce.

GOAL:
To
License
Qualified Persons
for the Practice
of
Nursing

Licensure Goal: To License Qualified Persons for the Practice of Nursing

Specific Objectives Directed toward Nurse Licensure Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|--|---|
| L.1. Assure the continued competence of licensed nurses | ▪ Implement a process for demonstration of continued competence as a condition of licensure by endorsement, reinstatement and renewal. |
| L.2. Participate in APPN Compact | ▪ Adopt/implement APRN Compact |
| L.3. Regulate nursing assistants | ▪ Adopt and implement Nursing Assistant regulatory processes |
| L.4. Improve processes for nurse licensure: <ul style="list-style-type: none">▪ ↓time to process application▪ ↓complexity for applicants▪ ↓unnecessary barriers▪ ↑customer satisfaction | ▪ Meet or exceed 60% of CORE best practices |
| L.5. Facilitate interstate mutual recognition of RN, LPN licensure | ▪ Continue participation in Nurse Licensure Compact |
| L.6. Maintain on-going licensure responsibilities for license by: <ul style="list-style-type: none">▪ Exam▪ Endorsement▪ Reinstatement▪ Temporary License▪ Renewal | ▪ Qualified nurses are licensed in a timely and cost-effective manner |
| L.7. Standards for licensure are current and relevant and responsive to changes in the healthcare environment | ▪ Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports and reflected in statute and rules |

Key Factors External to the Board Which May Affect Nurse Licensure Goal Achievement

- Advanced in technology
- Decisions on the future regulation of APPNs
- Introduction of new licensure categories
- Evolving trends in how to measure continued competence
- Effects of the nurse shortage

GOAL: TO LICENSE QUALIFIED PERSONS FOR THE PRACTICE OF NURSING

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|--|--|---|--|
| <i>L.1. Assure the continued competence of licensed nurses</i> | - Implement a process for demonstration of continued competence as a condition of licensure by endorsement, reinstatement and renewal. | <ul style="list-style-type: none"> ▪ Explore models for measuring continued competence ▪ Determine the Model ▪ Pilot the process ▪ Promulgate rules for continued competence | <ul style="list-style-type: none"> ▪ Staff & Board ▪ Board ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ FY 2007-09 ▪ FY 2009 ▪ FY 2010 ▪ FY 2011 |
| <i>L.2. Participate in Advanced Practice Registered Nurse Compact</i> | - Adopt/implement APRN Compact | <ul style="list-style-type: none"> ▪ Continue to monitor appropriateness to proceed ▪ Adopt uniform standards ▪ Adopt Compact ▪ Rule promulgation ▪ Implement Compact | <ul style="list-style-type: none"> ▪ Board ▪ Board ▪ Board ▪ Board & Staff ▪ Staff | <ul style="list-style-type: none"> ▪ FY 2007-08 ▪ FY 2009 ▪ FY 2009 ▪ FY 2010 ▪ FY 2011 |
| <i>L.3. Regulate nursing assistants</i> | - Adopt and implement Nursing Assistant regulatory processes | <ul style="list-style-type: none"> ▪ Define population to be regulated ▪ Identify and involve interested stakeholders ▪ Conduct stakeholder meetings ▪ Adopt statutory language ▪ Rule promulgation | <ul style="list-style-type: none"> ▪ Board ▪ Board & Staff ▪ Board & Staff ▪ Board ▪ Board & Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2007 ▪ FY2008 ▪ FY 2008 ▪ FY 2009 |
| <i>L.4. Improve processes for nurse licensure</i> <ul style="list-style-type: none"> ▪ ↓ time to process application ▪ ↓ complexity for applicants ▪ ↓ unnecessary barriers ▪ ↑ customer satisfaction | -Meet or exceed 60% of CORE best practices | <ul style="list-style-type: none"> ▪ Analyze current processes to determine problem areas and opportunities for improvement ▪ Research and identify CORE best practices ▪ Implement 1-2 best practices | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2007 ▪ FY 2008 |

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|--|---|-------------------------|--|
| <i>L.5. Facilitate interstate mutual recognition of RN, LPN licensure</i> | -Continue participation in Nurse Licensure Compact | <ul style="list-style-type: none"> ▪ Collaborate with other states implementing the Nurse Licensure Compact ▪ Participate as an active member of the Nurse Licensure Compact Administrators Organization ▪ Analyze the impact of the Nurse Licensure Compact on practice, discipline and Board operation in Idaho ▪ Assist other states in adopting the Compact | ▪ Staff | <ul style="list-style-type: none"> ▪ FY 2007 and Ongoing ▪ FY 2007 and Ongoing ▪ FY 2007, 2012 ▪ Ongoing |
| <i>L.6. Maintain ongoing licensure responsibilities for license by</i> <ul style="list-style-type: none"> ▪ Exam ▪ Endorsement ▪ Reinstatement ▪ Temporary License ▪ Renewal | -Qualified nurses are licensed in a timely and cost-effective manner | <ul style="list-style-type: none"> ▪ Assess current operations ▪ Research and identify CORE best practices ▪ Implement 1-2 best practices | ▪ Staff | <ul style="list-style-type: none"> ▪ Annually ▪ FY 2007 ▪ FY 2008 |
| <i>L.7. Standards for licensure are current and relevant and responsive to changes in the healthcare environment</i> | -Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports and reflected in statute and rules | <ul style="list-style-type: none"> ▪ Trends related to nursing practice are analyzed and strategies developed ▪ Disseminate findings | ▪ Board & Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2008 |

GOAL:
To Determine,
Communicate, and
Enforce Standards of
Conduct and
Standards of
Nursing Practice

Practice Goal: To Determine, Communicate and Enforce Standards of Conduct and Standards of Nursing Practice

Specific Objectives Directed toward Nursing Practice Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|--|--|
| P.1. Provide an effective alternative to discipline | ▪ Eligible licensees enroll in and successfully complete PRN or are disciplined based on non-compliance. |
| P.2. Reduce nursing practice errors | ▪ Nursing practice errors are identified and strategies implemented to address root cause |
| P.3. Re-entry to competent practice after <ul style="list-style-type: none">▪ Extended absence from practice▪ Disciplinary action▪ Previous restrictions | ▪ Individuals seeking to re-enter practice become licensed, are employed and demonstrate competence |
| P.4. Standards of conduct and practice are current and relevant and responsive to changes in the healthcare environment | ▪ Public feedback indicates statute and rules are relevant to current practice |
| P.5. Violations of statute and rules are identified and addressed | ▪ The process for managing disciplinary complaints from receipt to resolution is fair, efficient and appropriate for public protection |
| P.6. Peer review assists APPNs in maintaining competence | ▪ APPNs participate in peer review and identify and correct deficiencies |

Key factors External to the Board Which May Affect Nursing Practice Goal Achievement

- TERCAP instrument availability
- NCSBN progress toward research on alternative program effectiveness
- Healthcare economics
- Nurse shortage
- Development and revision of national standards

**GOAL: TO DETERMINE, COMMUNICATE, AND ENFORCE STANDARDS OF CONDUCT
AND STANDARDS OF NURSING PRACTICE**

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|--|--|---|---|---|
| <i>P.1. Provide an effective alternative to discipline</i> | -Eligible licensees enroll in and successfully complete or are disciplined based on non-compliance | <ul style="list-style-type: none"> ▪ Conduct/participate in research project(s) that provide evidence of PRN effectiveness ▪ Assess the vendor's adherence to contract terms ▪ PRNAC annual assessment and development of target goals | Staff & Board Board & PRNAC PRNAC | <ul style="list-style-type: none"> ▪ FY 2007 ▪ Monthly ▪ FY 2007 |
| <i>P.2. Reduction of nursing practice errors</i> | -Nursing practices are identified and strategies implemented to address root cause | <ul style="list-style-type: none"> ▪ Implementation of TERCAP ▪ Identification of system vs individual errors ▪ Facilitate development of corrective strategies | Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2007 then Ongoing ▪ FY 2008 then ongoing |
| <i>P.3. Re-entry to competent practice after:</i> <ul style="list-style-type: none"> ▪ Extended absence from practice ▪ Disciplinary action ▪ Previous restrictions | -Individuals seeking to re-enter practice become licensed, are employed and demonstrate competence | <ul style="list-style-type: none"> ▪ Implement re-entry policies ▪ Gather re-entry data ▪ Analyze data and revise policies as needed | Board & Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2008 ▪ FY 2009 |
| <i>P.4. Standards of conduct and practice are current and relevant and responsive to changes in the healthcare environment</i> | -Public feedback indicates statute and rules are relevant to current practice | <ul style="list-style-type: none"> ▪ Trends related to nursing practice are analyzed and strategies developed ▪ Modify statutes and rules as necessary ▪ Statute & rules are analyzed for relevance to practice trends | Board & Staff Board Board & Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2009 ▪ FY 2008 |

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|--|---|---|--|---|
| <i>P.5. Violations of the statute and rules are identified and addressed</i> | -The process for managing disciplinary complaints from receipt to resolution is fair, efficient and appropriate for public protection | <ul style="list-style-type: none"> ▪ Receive, investigate, substantiate and resolve disciplinary complaints in a timely manner ▪ Enhance the process of informing the public about procedures for reporting concerns and public complaints related to nursing practice ▪ Analyze cost and effectiveness of disciplinary procedures ▪ Update policies and procedures for complaint processing ▪ Identify and implement CORE best practice and identify strategies | Board & Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2007 ▪ FY 2007 ▪ FY 2008 ▪ FY 2008 |
| <i>P.6. Peer review assists APPNs in maintaining competence</i> | -APPNs participate in peer review and identify and correct deficiencies | <ul style="list-style-type: none"> ▪ Audit peer review participation ▪ Analyze peer review audit results and identify effective processes ▪ Identify peer review best practices ▪ Disseminate peer review practices to licensees | Staff & APPNAC Staff APPAC Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2008 ▪ FY 2009 ▪ FY 2010 |

GOAL:
To Determine,
Communicate and Enforce
Standards for
Educational Programs
Preparing Nurses for
Practice at all Levels

Nursing Education Goal: To Determine, Communicate and Enforce Standards for Educational Programs Preparing Nurses for Practice at All Levels

Specific Objectives Directed toward Nursing Education Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|---|---|
| E.1. Education program standards direct quality education regardless of educational delivery method | ▪ Graduates of approved programs demonstrate beginning-level competence as evidenced by NCLEX pass rate, employer satisfaction. |
| E.2. Support a statewide nursing education system that meets the needs of the state | ▪ Board decisions related to number, kind and quality of programs is congruent with a statewide plan |
| E.3. Standards for nursing education are current and relevant and responsive to changes in the academic environment | ▪ Public feedback indicates statute and rules allow for changes in academia |
| E.4. The Board approves nursing education programs that meet recognized standards and criteria | ▪ The process for approval of nursing education programs is consistent |

Key Factors External to the Board Which May Affect Nursing Education Goal Achievement

- Changing nature and methods of educational delivery
- Alternative education delivery related to clinical education, e.g. location of the patient population, simulation methods, decrease in available clinical sites, etc.
- Nurse shortage
- Nurse faculty shortage
- Proprietary program influx
- Statewide progress on development of a long-range plan for nursing education

GOAL: TO DETERMINE, COMMUNICATE, AND ENFORCE STANDARDS FOR EDUCATION PROGRAMS PREPARING NURSES FOR PRACTICE AT ALL LEVELS

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|---|--|---|--|
| E.1. Education program standards direct quality education regardless of educational delivery method | -Graduates of approved programs demonstrate beginning level competence as evidenced by NCLEX pass rate, employer satisfaction | <ul style="list-style-type: none"> ▪ Review/revise rules in relation to NCSBN model rules, distance, on-line, traditional and non-traditional programs ▪ Promulgate rules | <ul style="list-style-type: none"> ▪ Rules Revision Task Force ▪ Board & Staff | <ul style="list-style-type: none"> ▪ FY 2008 ▪ FY 2008 |
| E.2. Support a statewide nursing education system that meets the needs of the state | -Board decisions related to number, kind and quality of programs is congruent with a state-wide plan | <ul style="list-style-type: none"> ▪ Facilitate development of a statewide plan for nursing education ▪ Implement strategies necessary to support the plan ▪ Review and approve educational programs as defined | <ul style="list-style-type: none"> ▪ Board ▪ Board ▪ Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2008-09 ▪ Ongoing |
| E.3. Standards for nursing education are current and relevant and responsive to changes in the academic environment | -Public feedback indicates statute and rules allow for changes in academia | <ul style="list-style-type: none"> ▪ Trends related to nursing education are analyzed and strategies developed ▪ Statute and rules are analyzed for relevance to current academic practices and the changing healthcare environment ▪ Modify statute and rules as necessary | <ul style="list-style-type: none"> ▪ Board & Staff ▪ Board & Staff ▪ Board & Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2011 ▪ As appropriate |
| E.4. The Board approves nursing education programs that meet recognized standards and criteria | - The process for approval of nursing education programs is consistent | <ul style="list-style-type: none"> ▪ Analyze program criteria defined by the Board, the State Board of Education, nursing education accrediting organizations and others for similarity and differences ▪ Establish procedures to determine program compliance with BON criteria | <ul style="list-style-type: none"> ▪ Staff ▪ Board | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2008 |

GOAL:
**To Assure the Governance
Framework
and Culture Supports the
Accomplishment of the
Board's Vision, Mission and
Goals**

Governance Goal: To Assure the Governance Framework and Culture Supports the Accomplishment of the Board's Vision, Mission and Goals

Specific Objectives Directed toward Governance Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|---|---|
| G.1. Promote a model of policy governance | <ul style="list-style-type: none"> Board assessment processes indicate that the Board utilizes principles of policy governance |
| G.2. Directives of the Board, including statute, rules, policies, procedures are consistent with and support the Vision, Mission, Values and Strategic Plan | <ul style="list-style-type: none"> Board assessment processes indicate support of vision, accomplishment of mission, adherence to values and use of strategic thinking |
| G.3. Strategic Plan is the framework for Board operation and agency performance | <ul style="list-style-type: none"> Annual plan submitted and accepted by DFM |
| G.4. Competent Board members | <ul style="list-style-type: none"> Positive post-Board meeting evaluations Board decisions reflect Mission and Vision Board decisions are upheld on appeal |
| G.5. Public participation in policy decisions | <ul style="list-style-type: none"> Major Board initiatives reflect formal solicitations of public input |
| G.6. APPNAC and PRNAC respective missions are accomplished | <ul style="list-style-type: none"> Positive annual committee self-assessment |
| G.7. The Board is responsive to State and national healthcare policy decisions | <ul style="list-style-type: none"> Active Board involvement in a variety of healthcare policy arenas |
| G.8. Collaborate with stakeholders both in and outside of nursing | <ul style="list-style-type: none"> Board assessment processes indicate collaboration with stakeholders |

Key Factors External to the Board Which May Affect Governance Goal Achievement

- Changing Board Members
- Agency budget appropriation
- Change in Board staff
- Changing healthcare environment
- Trends in governance models

GOAL: TO ASSURE THE GOVERNANCE FRAMEWORK AND CULTURE SUPPORTS THE ACCOMPLISHMENT OF THE BOARD'S VISION, MISSION AND GOALS

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|--|--|---|---|
| G.1. Promote a model of policy governance | -Board assessment processes indicate that the Board utilizes principles of policy governance | <ul style="list-style-type: none"> ▪ All Board members are educated on principles of policy governance ▪ Annual self-assessment measures Board adherence to governance principles | ▪ Board | <ul style="list-style-type: none"> ▪ New Board member orientation and quarterly ▪ Annual |
| G.2. Directives of the Board, including statute, rules, policies, procedures are consistent with and support the Vision, Mission, Values and Strategic Plan | -Board assessment processes indicate support of vision, accomplishment of mission, adherence to values and use of strategic thinking | <ul style="list-style-type: none"> ▪ Review Board processes and decisions to assure internal congruence with vision, mission, values, and strategic plan ▪ Review and revise policies to assure congruence ▪ Annually review and revise self assessment instrument and procedure in relation to vision, mission, values and strategic plan ▪ Review and revise NPA and administrative rules in accordance with adopted review schedule | ▪ Board, Governance Committee, & Staff | <ul style="list-style-type: none"> ▪ At the end of each FY ▪ Annual ▪ Annual ▪ Per Schedule |
| G.3. Strategic Plan is the framework for Board operation and agency performance | -Annual plan submitted and accepted by DFM | <ul style="list-style-type: none"> ▪ Review, modify and implement annual plan | ▪ Board & Staff | <ul style="list-style-type: none"> ▪ Annually |
| G.4. Competent Board members | <ul style="list-style-type: none"> -Positive post-Board meeting evaluations -Board decisions reflect Mission and Vision -Board decisions are upheld on appeal | <ul style="list-style-type: none"> ▪ Conduct New Board member orientation ▪ Develop new Board member mentoring program ▪ Continuous Board education: <ul style="list-style-type: none"> a) Issue specific b) Policy Governance | <ul style="list-style-type: none"> ▪ Staff ▪ Board ▪ Board & Staff | <ul style="list-style-type: none"> ▪ At times of appointment ▪ 2007 ▪ Ongoing |

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|--|---|--|--|--|
| G.5. Public participation in policy decisions | -Major Board initiatives reflect formal solicitations of public input | <ul style="list-style-type: none"> ▪ Public forum is included with each formal Board meeting ▪ Include public members on Board committees and panels ▪ Rulemaking includes 'negotiated rulemaking' processes ▪ Identify stakeholders for each major initiative, and engage partnerships as necessary | <ul style="list-style-type: none"> ▪ Board ▪ Board ▪ Staff & Board ▪ Board | <ul style="list-style-type: none"> ▪ Quarterly ▪ As appropriate ▪ During Rulemaking process ▪ As appropriate |
| G.6. APPNAC and PRNAC respective missions are accomplished | -Positive annual committee self-assessment | <ul style="list-style-type: none"> ▪ Appoint members to committees ▪ Refine purpose and goals of committee ▪ Develop assessment processes | <ul style="list-style-type: none"> ▪ Board ▪ Board & Committee ▪ Committees | <ul style="list-style-type: none"> ▪ As scheduled ▪ Annual ▪ 2007 |
| G.7. The Board is responsive to State and national healthcare policy decisions | - Active Board involvement in a variety of healthcare policy arenas | <ul style="list-style-type: none"> ▪ Participate in meetings and forums regarding health care planning and decision making ▪ Maintain positive relationships with key policy makers and others who influence policy | <ul style="list-style-type: none"> ▪ Board & Staff ▪ Board & Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing |
| G.8. Collaborate with stakeholders both in and outside of nursing | -Board assessment processes indicate collaboration with stakeholders | <ul style="list-style-type: none"> ▪ Identify issues where collaboration is appropriate ▪ Initiate dialogue with stakeholders | <ul style="list-style-type: none"> ▪ Board & Staff ▪ Board & Staff | <ul style="list-style-type: none"> ▪ FY 2007 ▪ Ongoing |

GOAL:

**To Facilitate Information
Exchange between the Board
and its Colleagues, Constituent
Groups, and other Agencies in
Order to Fulfill the
Board's
Vision and Mission**

Information Exchange Goal: To Facilitate Information Exchange between the Board and its Colleagues, Constituent Groups, and other Agencies in Order to Fulfill the Board's Vision and Mission

Specific Objectives Directed toward Information Exchange Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|---|--|
| I. 1. Inform the public about Board mission and role in public protection | <ul style="list-style-type: none"> ▪ Phone calls, requests for information are received from a variety of sources ▪ Increase in Website visits ▪ Staff and Board members receive requests for participation in forums/and presentations |
| I.2. Effectively communicate with the public, including licensees, employers, policy makers and consumers | <ul style="list-style-type: none"> ▪ Decrease in complaints related to ability to contact Board ▪ CORE research reflects positive communications |
| I.3. Maintain accurate, comprehensive, accessible nurse licensure data | <ul style="list-style-type: none"> ▪ The Idaho Nurse Licensure database provides information necessary for nursing regulation, nursing workforce research and statewide policy-decisions |

Key Factors External to the Board Which May Affect Information Exchange Goal Achievement

- State of Idaho support, particularly technology support to Board systems
- Technology hardware maintenance and replacement costs
- Software upgrades for systems protection
- Challenges to/revisions of the Idaho Public Information Act

GOAL: TO Facilitate Information Exchange between the Board and its Colleagues, Constituent Groups, and other Agencies in Order to Fulfill the Board's Vision and Mission

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|---|---|--|---|
| I.1. Inform the public about Board mission and role in public protection | <ul style="list-style-type: none"> -Phone calls, requests for information are received from a variety of sources -Increase in Website visits -Staff and Board members receive requests for participation in forums and presentations | <ul style="list-style-type: none"> ▪ Maintain website to be user friendly, current, accurate, and pertinent to trends in information requests ▪ Set up tracking process and preliminary evaluation of trends regarding requests for information ▪ Plan Board Centennial celebration | <ul style="list-style-type: none"> ▪ Management Assistant ▪ Staff ▪ Board & Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2007, then Ongoing ▪ FY 2009 |
| I.2. Effectively communicate with the public, including licensees, employers, policy makers and consumers | <ul style="list-style-type: none"> -Decrease in complaints related to ability to contact Board -CORE research reflects positive communications | <ul style="list-style-type: none"> ▪ Upgrade communications technology consistent with IT plan ▪ Participation in the proposed State Health Portal ▪ Analyze and address specific communication concerns | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2007 ▪ Ongoing |
| I.3. Maintain accurate, comprehensive, accessible nurse licensure data | <ul style="list-style-type: none"> - The Idaho Nurse Licensure database provides information necessary for nursing regulation, nursing workforce research and statewide policy-decisions | <ul style="list-style-type: none"> ▪ Analyze and revise minimum data set for database ▪ Maintain and upgrade technology for access to data and ease of use ▪ Incorporate technological tools necessary to protect privacy and maintain confidentiality ▪ Timely publish the Board's Annual Report | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff ▪ Board/Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Annual |

GOAL:
To Assure the
Organizational
Infrastructure
Supports the Vision,
Mission and Goals of the
Idaho Board of Nursing

Organization Goal: To Assure the Organizational Infrastructure Supports the Vision, Mission and Goals of the Idaho Board of Nursing

Specific Objectives Directed toward Organization Goal Achievement

| <i>Objectives</i> | <i>Performance Measure</i> |
|---|---|
| O.1. Develop and maintain adequate resources: <ul style="list-style-type: none"> ▪ Revenue adequate to meet Expenses ▪ Qualified Personnel ▪ Up-to-date Equipment/Technology | <ul style="list-style-type: none"> ▪ Annual budget supports accomplishment of planned activities for the fiscal year ▪ Biennial revenue exceeds expenses ▪ Fund balance equals 12 months operating costs ▪ All approved staff positions are filled/staff perform at or above the expectations for their positions ▪ Staff report that equipment/technology are appropriate to their work needs |
| O.2. Resources support and facilitate accomplishment of Board mission and goals. | <ul style="list-style-type: none"> ▪ Feedback following Board meetings indicates appropriate meeting preparation and staff and attorney support ▪ Positive annual Board self-assessment ▪ Positive annual Board assessment of executive director performance |
| O.3. Expectations of the public, licensees, legislature and Governor about the Board are adequately met | <ul style="list-style-type: none"> ▪ Board is recognized for best practices through CORE Report ▪ No negative feedback is received from constituent groups |
| O.4. Technology is relevant, efficient and effective in supporting organizational functions and Board initiatives | <ul style="list-style-type: none"> ▪ Staff assessment indicates agency performance is adequately supported by technology ▪ CORE report indicates positive effects of use of technology |
| O.5. Enhance staff competence related to roles and responsibilities | <ul style="list-style-type: none"> ▪ Staff meet annual performance expectations for key job responsibilities, customer service, and interpersonal relationships |
| O.6. Satisfactory staff compensation | <ul style="list-style-type: none"> ▪ Staff compensation policy reflects adjustments for performance, longevity, outstanding contributions and market trends ▪ Staff compensation is annually assessed and adjusted consistent with agency policy |
| O.7. Board Office is reflective of the Mission and Vision of the Board | <ul style="list-style-type: none"> ▪ The office is publicly convenient, accessible, cost-effective, and consistent with the professional image of the Board ▪ Quality improvement measures identified by staff are implemented |

Key Factors External to the Board Which May Affect Organization Goal Achievement

- Trends in market cost of office space
- Unanticipated staff turnover
- Legislative directives and appropriations in the areas of operations, capital, and employee compensation

GOAL: TO ASSURE THE ORGANIZATIONAL INFRASTRUCTURE SUPPORTS THE VISION, MISSION AND GOALS OF THE IDAHO BOARD OF NURSING

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|--|---|--|--|---|
| <p>O.1. Develop and maintain adequate resources:</p> <ul style="list-style-type: none"> ▪ Revenue adequate to meet Expenses ▪ Qualified Personnel ▪ Up-to-date Equipment/Technology | <ul style="list-style-type: none"> - Annual budget supports accomplishment of planned activities for the fiscal year - Biennial revenue exceeds expenses - Fund balance equals 12 months operating costs - All approved staff positions are filled/staff perform at or above the expectations for their positions - Staff report that equipment/technology are appropriate to their work needs | <ul style="list-style-type: none"> ▪ Operate within the approved budget and FTE appropriations ▪ Analyze and address workload/workforce issues ▪ Develop a long-range strategic forecast to support licensure fee projections for the future ▪ Identify and maintain outside contracts for selected projects ▪ Increase the BON fund balance to 12 mo. Operating held in reserve ▪ Strict adherence to internal control policies | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff ▪ Board with Staff support ▪ Staff | <ul style="list-style-type: none"> ▪ Annual ▪ Ongoing ▪ FY 2007-08 ▪ Ongoing ▪ 8 mo FY 08 10 mo FY 09 12 mo FY 10 ▪ Ongoing |
| <p>O.2. Resources support and facilitate accomplishment of Board mission and goals.</p> | <ul style="list-style-type: none"> - Feedback following Board meetings indicates appropriate meeting preparation and staff and attorney support - Positive annual Board self-assessment - Positive annual Board assessment of executive director performance | <ul style="list-style-type: none"> ▪ Information to the Board is timely and relevant ▪ Meeting location is conducive to accomplishing work ▪ Board and staff travel is adequately supported ▪ Appropriate counsel is provided ▪ Facilitate Board meeting assessments and Board annual assessment | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Quarterly/Annually |

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|---|--|--|--|---|
| O.3. Expectations of the public, licensees, legislature and Governor about the Board are adequately met | <ul style="list-style-type: none"> - Board is recognized for best practices through CORE Report - No negative feedback is received from constituent groups | <ul style="list-style-type: none"> ▪ Active participation in NCSBN CORE ▪ Annual review of CORE data ▪ Investigate and resolve complaints about agency | <ul style="list-style-type: none"> ▪ Staff ▪ Board ▪ Board/Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ Annual ▪ Ongoing |
| O.4. Technology is relevant, efficient and effective in supporting organizational functions and Board initiatives | <ul style="list-style-type: none"> - Staff assessment indicates agency performance is adequately supported by technology - CORE report indicates positive effects of use of technology | <ul style="list-style-type: none"> ▪ Implement the organization's IT plan ▪ Consider IT solutions to enhance program efficiency ▪ Implement staff assessment of office technology | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ Annual ▪ On-going ▪ 2007 |
| O.5. Enhance staff competence related to roles and responsibilities | <ul style="list-style-type: none"> - Staff meet annual performance expectations for key job responsibilities, customer service, and interpersonal relationships | <ul style="list-style-type: none"> ▪ Implement processes of ongoing continuing education for staff ▪ Develop a written plan for staff orientation to core knowledge/skill expectations ▪ Develop written orientation packet, reference materials, mentoring processes for all new/newly promoted staff ▪ Identify external opportunities to enhance knowledge and skills | <ul style="list-style-type: none"> ▪ Ex Director/ Mgt Ass't ▪ Ex Dir/Mgt Ass't ▪ Mgt Ass't ▪ Staff | <ul style="list-style-type: none"> ▪ Annual ▪ 2007 ▪ 2008 ▪ Ongoing |

| Objective | Performance Measure | Benchmarks | Responsibility Assigned | Timeframe |
|--|--|--|--|---|
| O.6. Satisfactory staff compensation | <ul style="list-style-type: none"> - Staff compensation policy reflects adjustments for performance, longevity, outstanding contributions and market trends - Staff compensation is annually assessed and adjusted consistent with agency policy | <ul style="list-style-type: none"> ▪ Research market trends for professional and support staff job categories ▪ Develop policy to link staff compensation to performance, and service, and market trends ▪ Develop a plan for compensation adjustment ▪ Develop a plan to adjust Ex Dir salary consistent with market trends | <ul style="list-style-type: none"> ▪ Management Assistant ▪ Ex Director ▪ Ex Director ▪ Board/ED | <ul style="list-style-type: none"> ▪ FY 2007 ▪ FY 2007 ▪ FY 2007 ▪ FY 2007-08 |
| O.7. Board Office is reflective of the Mission and Vision of the Board | <ul style="list-style-type: none"> - The office is publicly convenient, accessible, cost-effective, and consistent with the professional image of the Board - Quality improvement measures identified by staff are implemented | <ul style="list-style-type: none"> ▪ Analyze office space and efficiency needs for anticipated agency growth ▪ Negotiate long-term lease based on Dept of Administration specifications ▪ Staff assessment of improvement measures for office operations | <ul style="list-style-type: none"> ▪ Staff ▪ Staff ▪ Staff | <ul style="list-style-type: none"> ▪ Ongoing ▪ FY 2007 ▪ Annual |

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